

CA 20N

H
- 2232

y of

Ministry of the
Solicitor General

ONTARIO'S MENTAL HEALTH ACT

A Guide for Police

3 1761 11893959 4

CA20N

H

-7232

Government
Publications

DEPOSITORY LIBRARY MATERIAL

Mental illness is recognized as a serious problem in Ontario. A significant number of our citizens will, at some point in their lives, require treatment for mental disorder.


During the course of your regular police duties you may reasonably expect to encounter persons who are mentally ill. It is therefore essential that you understand the role of the police in the mental health care process in this province.

This guide for the police community has been produced and published by the Ministry of Health with the co-operation of the Ministry of the Solicitor General. It is designed for use by members of all police forces in Ontario.

The publication answers the questions police are most frequently confronted with when dealing with the mentally ill. Sections of The Mental Health Act relevant to the law enforcement community are included in the guide, which can be used as a comprehensive reference source. Also included are copies of forms issued under The Mental Health Act and a summary of their use.

Additional copies of this booklet are available free of charge, along with copies of The Mental Health Act and amendments, at a nominal charge, from the Ontario Government Bookstore, 880 Bay Street, Toronto, Ontario M7A 1N8 Telephone: (416) 965-2054.





Digitized by the Internet Archive
in 2024 with funding from
University of Toronto

Ontario's Mental Health Act

A Guide for Police

Contents	Page
Mental illness and mental health care in Ontario	1
Hospitalization of the mentally ill	1
Role of the physician	2
Role of the Justice of the Peace	2
Role of the police	3
Authority to apprehend and convey	3
Place of assessment	4
Responsibility of police at place of assessment	4
Responsibility of attending physician at place of assessment	4
Order by the Minister of Health	4
Legal orders	5
Return of patients to psychiatric facilities	5
Order for return	5
Disclosure of psychiatric records	5
Confidentiality of records	6
Consent to disclosure	6
Legal orders for disclosure	6
Matters under federal jurisdiction	6
Appendix A	11
The Mental Health Act	
Sections 6, 8, 9, 10, 11, 15, 21, 25, 25a	
Appendix B	19
Forms under The Mental Health Act	
Appendix C	35
Schedule 1 psychiatric facilities	

Mental illness and mental health care in Ontario

Mental illness is a complex problem that appears in many different forms. As our understanding of mental illness has increased, vast changes have taken place in our treatment of the mentally ill:

- The growing philosophy of treatment in the community, as an alternative to hospitalization, has meant that a relatively small number of people now need to go into hospital.
- Of those requiring hospitalization, by far the greatest number are admitted “informally” or voluntarily. These patients have requested or have agreed to hospitalization, and are under no obligation to remain at a facility.
- Services have been developed in communities where patients live. For example, psychiatric services are now offered in 60 public hospitals in Ontario. And there has been a major growth in out-patient services offered by public hospitals, psychiatric hospitals and other agencies.
- A wide range of additional support services have been developed such as day care, counselling services, approved homes, sheltered workshops and volunteer programs.

These services, along with advances in our treatment of the mentally ill, are clear indications of progress toward better understanding and management of mental illness.

Hospitalization of the mentally ill (*Sections 6, 7, 8, 9, 10*)

Anyone in Ontario may be admitted informally to a Schedule 1 psychiatric facility* (which includes provincial psychiatric hospitals and certain public hospitals with psychiatric units) if, in the opinion of a physician, he or she is in need of psychiatric care.

However, it is important that individuals suffering from a mental disorder who are unwilling to seek or accept care, and who may cause serious bodily harm to themselves or others, or suffer imminent and serious physical impairment, be brought to an appropriate facility for psychiatric assessment.

Accordingly, Ontario's Mental Health Act provides authority, under certain circumstances, to physicians, Justices of the Peace, police and members of the general public to ensure that these individuals receive psychiatric assessment and, if necessary, appropriate psychiatric care.

*See Appendix C

Admission to a psychiatric facility may be refused where the immediate needs of a proposed patient are such that hospitalization is not urgent or necessary. Therefore, police officers about to take patients for assessment a relatively long distance should call the psychiatric facility in advance.

Role of the Physician (Section 8)

Any physician may request the assessment of an individual by completing an Application for Psychiatric Assessment (Form 1).

This form states that the physician has personally examined the person, and on the basis of this and information provided by others such as police, friends or relatives, has gathered all the information necessary to form his or her opinion about the nature of the mental disorder.

The application for assessment must be signed within seven days of the initial examination. Once signed and dated, it provides authority for anyone, including police, relatives or friends, to take the individual in custody to a Schedule 1 psychiatric facility* (which includes provincial psychiatric hospitals and certain public hospitals with psychiatric units), where he or she may be detained for assessment for not more than five days.

The form provides this authority for a period of seven days from and including the day it was signed.

Role of the Justice of the Peace (Section 9)

When a physician's application for assessment cannot be obtained, neighbours, friends, relatives and others, including police, may request an order for assessment from a Justice of the Peace. This order can only be obtained when there is reasonable cause to believe the individual is apparently suffering from a mental disorder that is likely to result in serious bodily harm to himself or others, or imminent and serious physical impairment of his person. The Justice of the Peace completes this Order for Assessment (Form 2) on the basis of sworn information.

It provides authority for a police officer to take the person named or described in the order in custody to an appropriate place where he or she may be detained for assessment by a physician. The form provides this authority for a period of seven days from and including the day it was signed.

This form does not provide the authority to detain a person any longer than is necessary for the initial assessment. Only the

* See Appendix C

application for psychiatric assessment, Form 1, provides this authority.

Role of the Police (*Section 10*)

In addition to your responsibilities under the Application by a Physician for a Psychiatric Assessment (Form 1) and Order for Assessment (Form 2) you may also, under certain circumstances, take an individual in custody on your own authority to an appropriate place for assessment by a physician. This authority does not permit the detention of the individual any longer than is necessary for the initial assessment. This authority can be exercised only when all of the following conditions exist:

- You must personally observe the person behaving in a disorderly manner.
- You must have reasonable cause to believe the person has threatened OR attempted to cause bodily harm to himself or to others, OR causes others to fear bodily harm from him, OR is unable to care for himself.
- You must be of the opinion that the person is apparently suffering from a mental disorder of a type that is likely to result in serious bodily harm to himself OR others, OR imminent and serious physical impairment of his person.
- You must be of the opinion that it would be dangerous to wait until an order for assessment could be obtained from a Justice of the Peace.

This represents an important police responsibility to ensure that those requiring psychiatric care are seen by a physician, when harm to the individual or others is anticipated. If the behaviour is not disorderly but you are of the opinion that serious bodily harm to the person or others, or imminent and serious physical impairment of the person, may result, you may request an order for assessment from a Justice of the Peace, and should do so as soon as possible.

Authority to Apprehend and Convey (*Sections 8, 9, 10, 21*)

The Act provides authority for police to apprehend a person and to take that person in custody to a psychiatric facility (in the case of a Form 1 under Section 8), and to an appropriate place for assessment (Sections 9, 10), if that person is unwilling to go voluntarily. Where the authority to apprehend an individual is given under the Act, (Sections 8, 9, 21), this would include the

authority to search for the person, to enter premises forcibly, if necessary, and to take the person into custody.

Place of Assessment (*Sections 8, 9, 10*)

A person requiring assessment under a Form 1 has already been seen under Section 8 and must be taken to a psychiatric facility (which includes public hospitals with psychiatric units).

A person requiring assessment under an order of a Justice of the Peace, Section 9, or apprehended by a police officer under Section 10 should, where feasible, be taken directly to a psychiatric facility, which includes certain public hospitals with psychiatric units. When this is not feasible, the individual should be detained in an appropriate place, such as a health facility, doctor's office or a jail, and an assessment should be conducted by a physician as soon as possible.

Responsibility of the Police at the Place of Assessment (*Section 25a*)

On bringing an individual to a psychiatric facility for assessment, the police officer must remain until the facility has effective control of the individual and has accepted custody. This responsibility does not necessarily require that the officer remain for the assessment.

If you anticipate laying charges, you may wish to remain at the facility until the results of the assessment have been determined.

Responsibility of the Attending Physician (*Section 11*)

The Act states that, when an individual is brought to a place of assessment under an order of a Justice of the Peace, or by a police officer on his or her own authority, a physician must conduct an initial assessment as promptly as possible.

Following the initial examination, the physician may sign an Application by a Physician for a Psychiatric Assessment (Form 1) or admit the patient informally, or release the individual.

Order by the Minister of Health (*Section 25*)

The Minister of Health may also authorize the police to take a person in custody to an appropriate psychiatric facility by completing an Order to Admit a Person Coming into Ontario (Form 13). This provides the hospital authority to admit, detain,

restrain, observe and examine the person for a period of up to five days.

It is most often used when Ontario residents, detained in facilities outside the province, are returned to Ontario.

Legal Orders (*Section 15 of The Mental Health Act; Sections 465, 543, and 738 of the Criminal Code of Canada.*)

The Act provides authority for a judge who has reason to believe that a person in custody who appears before him charged with an offence suffers from mental disorder, to remand the person for admission to a psychiatric facility for up to two months. (Form 8)

The Criminal Code (Canada) provides authority for a judge to remand a person for up to 30 or 60 days to determine whether the person is fit to stand trial.

A person found insane at the time he committed an offence or not fit to stand trial may come under a warrant of the Lieutenant Governor and be subject to detention within the conditions of that warrant. Such persons are usually held in psychiatric facilities. Should they escape, the Order For Return (Form 9) does not expire at the end of one month.

Return of Patients to Psychiatric Facilities (*Section 21*)

Circumstances may also arise in which you are required by the officer in charge of a psychiatric facility to return certain individuals to the facility.

Order for Return

When a person is subject to detention at a psychiatric facility but is absent without leave, you may be authorized by the officer in charge to return the person to the psychiatric facility, or the facility nearest the place of apprehension.

You may act without a formal order for the first 24 hours after the absence of the individual becomes known to the officer in charge, or with an Order For Return (Form 9) signed by the officer in charge of the facility, thereafter. The order provides authority for one month from the time the absence of the patient is known to the officer in charge.

Disclosure of Psychiatric Records (*Section 26a*)

In order to effectively treat psychiatric illness, it is essential that the relationship between the patient and those responsible

for his care be protected. For this reason, and to protect the patient's right to privacy, The Mental Health Act sets out very specific guidelines as to when, where and to whom a psychiatric record or any part of a psychiatric record, may be disclosed.

Confidentiality of Records

Under the Act, all information from the clinical record of a patient must be kept confidential. Physicians and psychiatric facilities are not allowed to release any information regarding the condition or treatment of a patient to police officers or to other individuals not directly involved in that treatment. To disclose this information would constitute an offence under the Act.

The facility may disclose information, however, with the permission of the patient, or in some cases, the nearest relative of the patient. In addition, the facility must disclose information in accordance with certain judicial orders.

Consent to Disclose

Records and information from records may be released where the applicable consent form (Form 14) has been completed by the patient, where he or she has attained the age of majority and is mentally competent, or by the patient's nearest relative, where this is not the case.

This form specifies the identity of the facility in possession of the clinical record and the person or facility to whom the information is being released.

Legal Orders for Disclosure

Information must be disclosed in accordance with a subpoena, order, notice or similar requirement regarding a court action or under any Act. However, if the physician is of the opinion that disclosure of all or any part of a record is likely to harm the treatment or recovery of the patient or any other individual, he may file a Statement by Attending Physician (Form 15) denying disclosure.

If the party seeking information wishes to persist, he or she can request a court hearing. If the court agrees with the physician's opinion, it cannot order the disclosure unless the court is satisfied that it is essential in the interests of justice to do so.

Matters Under Federal Jurisdiction

The authority to protect records from disclosure does not apply to matters under federal jurisdiction. Therefore, a valid search warrant under the Criminal Code, or any other order for disclosure under federal jurisdiction, must be complied with by the physician or health facility.

In appropriate cases, you may wish to contact the hospital in advance to provide an opportunity to copy the material that is the subject of a search warrant.

The Mental Health Act

Appendix A

The Mental Health Act

Sections 6, 8, 9, 10, 11, 15, 21, 25, 25a

Section 6

Notwithstanding this or any other Act, admission to a psychiatric facility may be refused where the immediate needs in the case of the proposed patient are such that hospitalization is not urgent or necessary.

Section 8

(1) Where a physician examines a person and has reasonable cause to believe that the person,

- (a) has threatened or attempted or is threatening or attempting to cause bodily harm to himself;
- (b) has behaved or is behaving violently towards another person or has caused or is causing another person to fear bodily harm from him; or
- (c) has shown or is showing a lack of competence to care for himself,

and if in addition the physician is of the opinion that the person is apparently suffering from mental disorder of a nature or quality that likely will result in,

- (d) serious bodily harm to the person;
- (e) serious bodily harm to another person; or
- (f) imminent and serious physical impairment of the person,

the physician may make application in the prescribed form for a psychiatric assessment of the person.

(2) An application under subsection 1 shall set out clearly that the physician who signs the application personally examined the person who is the subject of the application and made careful inquiry into all of the facts necessary for him to form his opinion as to the nature and quality of the mental disorder of the person.

- (3) A physician who signs an application under subsection 1,
 - (a) shall set out in the application the facts upon which he formed his opinion as to the nature and quality of the mental disorder;

(b) shall distinguish in the application between the facts observed by him and the facts communicated to him by others; and

(c) shall note in the application the date on which he examined the person who is the subject of the application.

(4) An application under subsection 1 is not effective unless it is signed by the physician within seven days after he examined the person who is the subject of the examination.

(5) An application under subsection 1 is sufficient authority for seven days from and including the day on which it is signed by the physician,

(a) to any person to take the person who is the subject of the application in custody to a psychiatric facility forthwith; and

(b) to detain the person who is the subject of the application in a psychiatric facility and to restrain, observe and examine him in the facility for not more than 120 hours.

Section 9

(1) Where information upon oath is brought before a justice of the peace that a person within the limits of the jurisdiction of the justice,

(a) has threatened or attempted or is threatening or attempting to cause bodily harm to himself;

(b) has behaved or is behaving violently towards another person or has caused or is causing another person to fear bodily harm from him; or

(c) has shown or is showing a lack of competence to care for himself,

and in addition based upon the information before him the justice of the peace has reasonable cause to believe that the person is apparently suffering from mental disorder of a nature or quality that likely will result in,

(d) serious bodily harm to the person;

(e) serious bodily harm to another person; or

(f) imminent and serious physical impairment of the person,

the justice of the peace may issue his order in the prescribed form for the assessment of the person by a physician.

(2) *Repealed*: 1978, c. 50, s.4 (2).

(3) An order under this section may be directed to all or any constable or other peace officers of the locality within which the justice has jurisdiction and shall name or otherwise describe the person with respect to whom the order has been made.

(4) An order under this section shall direct, and, for a period not to exceed seven days from and including the day that it is made, is sufficient authority for any constable or other peace officer to whom it is addressed to take the person named or described therein in custody forthwith to an appropriate place where he may be detained for assessment by a physician.

Section 10

Where a constable or other peace officer observes a person who acts in a manner that in a normal person would be disorderly and has reasonable cause to believe that the person,

- (a) has threatened or attempted or is threatening or attempting to cause bodily harm to himself;
- (b) has behaved or is behaving violently towards another person or has caused or is causing another person to fear bodily harm from him; or
- (c) has shown or is showing a lack of competence to care for himself,

and in addition the constable or other peace officer is of the opinion that the person is apparently suffering from mental disorder of a nature or quality that likely will result in,

- (d) serious bodily harm to the person;
- (e) serious bodily harm to another person; or
- (f) imminent and serious physical impairment of the person,

and that it would be dangerous to proceed under section 9, the constable or other peace officer may take the person in custody to an appropriate place for assessment by a physician.

Section 11

An assessment under section 9 or 10 shall be conducted by a physician forthwith after receipt of the person at the place of as-

assessment and where practicable the place shall be a psychiatric facility or other health facility.

Section 15

(1) Where a judge has reason to believe that a person in custody who appears before him charged with an offence suffers from mental disorder, the judge may, by order, remand that person for admission as a patient to a psychiatric facility for a period of not more than two months.

(2) Before the expiration of the time mentioned in such order, the senior physician shall report in writing to the judge as to the mental condition of the person.

Section 21

(1) Where a person who is subject to detention is absent without leave from a psychiatric facility, a constable or other peace officer or any one appointed by the officer in charge may return the person to the psychiatric facility or take the person to the psychiatric facility nearest to the place where the person is apprehended,

- (a) within twenty-four hours after his absence becomes known to the officer in charge; or
- (b) under the authority of an order in the prescribed form issued by the officer in charge, within one month after his absence becomes known to the officer in charge.

(2) A patient who is being returned under subsection 1 may be detained in an appropriate place in the course of his return.

(3) For the purposes of this Act, a patient who is returned under subsection 1 may be detained for the remainder of the period of detention to which he was subject when his absence became known to the officer in charge.

(4) Where a patient is not returned within one month after his absence became known to the officer in charge, he shall, unless subject to detention otherwise than under this Act, be deemed to be discharged from the psychiatric facility.

(5) No person shall do or omit to do any act for the purpose of aiding, assisting, abetting or counselling a patient in a psychiatric facility to be absent without authorization.

Section 25

Where the Minister has reasonable cause to believe that there may come or be brought into Ontario a person suffering from mental disorder of a nature or quality that likely will result in,

- (a) serious bodily harm to the person; or
- (b) serious bodily harm to another person,

unless the person is placed in the custody of a psychiatric facility, the Minister by an order in the prescribed form may authorize any one to take the person in custody to a psychiatric facility and the order is authority to admit, detain, restrain, observe and examine the person in the psychiatric facility.

Section 25a

A constable or other peace officer or any one who takes a person in custody to a psychiatric facility shall remain at the facility and retain custody of the person so taken until the facility accepts the custody of the person.

Appendix B

Forms Under The Mental Health Act

Appendix B

Forms under The Mental Health Act

Form No.	Form Name	Corresponding Section of Act	Who Signs	When	Expiration Date
1	Application by Physician for Psychiatric Assessment	8	Any physician	Within seven days after the examination	Seven days after signed
2	Order For Assessment by Justice of The Peace	9	Justice of the Peace	No statutory time restriction	Seven days from and including the day it is made
8	Order for Admission	15(1)	Judge	When person in custody appears before him charged with an offence	No statutory time restriction on time within which order must be executed. Once executed, authorizes detention for up to two months
9	Order for Return	21(1)	Officer-in-charge of psychiatric facility	When the absence of a person who is subject to detention becomes known to the officer-in-charge (No order necessary for initial 24 hours)	One month after absence became known to officer-in-charge, unless he is subject to detention otherwise than under this Act e.g., L.G.W.s.
13	Order to Admit a Person Coming Into Ontario	25	Minister of Health	No statutory time restriction	No statutory time restriction on time within which order must be executed; once executed, authorizes detention for up to five days (120 hours)
14	Consent to the Disclosure, Transmittal or Examination of a Clinical Record	26a(3)(a), 26a(3)(b)	Patient or Nearest Relative	No statutory time restriction	No statutory time restriction
15	Statement by Attending Physician Under Subsection 6 of Section 26a of the Act.	26a(6)	Attending Physician	When disclosure required by Court or under an Act and certain conditions exist.	No statutory time restriction



Application by Physician For Psychiatric Assessment

I, _____ of _____
(print name of physician) (address of physician)

the undersigned physician, state that:

1 On the _____ day of _____, 19____, I personally examined
(print full name of person) of (home address)

2 I have reasonable cause to believe that the said person _____

see
note 1

3 In addition, I am of the opinion that the said person is apparently suffering from mental disorder of a nature or quality that likely will result in _____

see
note 2

4 I made careful inquiry into all of the facts necessary for me to form my opinion as to the nature and quality of the said person's mental disorder.

5 The facts upon which I formed my opinion as to the nature and quality of the said person's mental disorder,

a) that were observed by me, are as follows: _____

b) that were communicated to me by others, are as follows: _____

6 The reason(s) why no measure short of hospitalization is (are) appropriate for this assessment is (are) as follows: _____

I therefore hereby make application for a psychiatric assessment of the said

(full name of person)

To the best of my knowledge the said person routinely receives the following medication: _____

To the best of my knowledge the said person has received the following medication within the last twenty-four hours: _____

Signed this _____ day of _____, 19____
(signature of physician)

Notes

1. Subsection 1 of section 8 of the Act states in part:

"Where a physician examines a person and has reasonable cause to believe that the person,

- a) has threatened or attempted or is threatening or attempting to cause bodily harm to himself;
- b) has behaved or is behaving violently towards another person or has caused or is causing another person to fear bodily harm from him; or
- c) has shown or is showing a lack of competence to care for himself"

2. Subsection 1 of section 8 of the Act states in part:

"The physician is of the opinion that the person is apparently suffering from mental disorder of a nature or quality that likely will result in,

- d) serious bodily harm to the person;

- e) serious bodily harm to another person, or

- f) imminent and serious physical impairment of the person"

3. Subsection 4 of section 8 of the Act is as follows:

"An application under subsection 1 is not effective unless it is signed by the physician within seven days after he examined the person who is the subject of the examination."

4. Subsection 5 of section 8 of the Act is as follows:

"An application under subsection 1 is sufficient authority for seven days from and including the day on which it is signed by the physician,

- a) to any person to take the person who is the subject of the application in custody to a psychiatric facility forthwith, and
- b) to detain the person who is the subject of the application in a psychiatric facility and to restrain, observe and examine him in the facility for not more than 120 hours."



Form 2
The Mental Health Act

ORDER FOR ASSESSMENT
BY JUSTICE OF THE PEACE

TO the peace officers of _____

WHEREAS information upon oath has been brought before me, a justice of the peace in and for

(name of area of jurisdiction)

by _____
(print full name of person bringing information)

of _____
(address of person bringing information)

that _____
(print full name or other description of person to be assessed)

of _____
(home address, if known)

SEE NOTE 1

and based upon the information before me I have reasonable cause to believe that such person is apparently suffering from mental disorder of a nature or quality that likely will result in

SEE NOTE 2

NOW THEREFORE I hereby order and direct you, the said peace officers, or any of you, to take the said

(name or other description of person)

in custody forthwith to an appropriate place for assessment by a physician.

(signature of Justice of the Peace)

(print name of Justice of the Peace)

Dated the _____ day of _____, 19____

FOR NOTES SEE REVERSE

1. Subsection 1 of section 9 of the Act states in part :

“ Where information upon oath is brought before a justice of the peace that a person within the limits of the jurisdiction of the justice,

- (a) has threatened or attempted or is threatening or attempting to cause bodily harm to himself;
- (b) has behaved or is behaving violently towards another person or has caused or is causing another person to fear bodily harm from him; or
- (c) has shown or is showing a lack of competence to care for himself.”

2. Subsection 1 of section 9 of the Act states in part :

“ Based upon the information before him the justice of the peace has reasonable cause to believe that the person is apparently suffering from mental disorder of a nature or quality that likely will result in,

- (d) serious bodily harm to the person;
- (e) serious bodily harm to another person; or
- (f) imminent and serious physical impairment of the person.”

3. Subsection 4 of section 9 of the Act is as follows:

“ An order under this section shall direct, and, for a period not to exceed seven days from and including the day that it is made, is sufficient authority for any constable or other peace officer to whom it is addressed to take the person named or described therein in custody forthwith to an appropriate place where he may be detained for assessment by a physician.”

4. Section 11 of The Mental Health Act states in part that

“ where practicable the (appropriate) place shall be a psychiatric facility or other health facility . ”



ORDER FOR ADMISSION

Form 8 The Mental Health Act, 1967 Section 15

In the _____ Court held at _____
(address)

for the County/District of _____

TO the Peace Officers in the _____ of _____

AND TO _____
(name of psychiatric facility)

WHEREAS _____
(name of person in full)

(address)

is a person in custody charged with _____
(offence)

contrary to section _____ of the _____

AND WHEREAS he/she has appeared before me and I have reason to believe that he/she suffers from mental disorder;

AND WHEREAS I have ascertained from _____, the
(name of senior physician/ as defined in the Act)
senior physician of _____, that the
(name of psychiatric facility)
services of the said psychiatric facility are available to the above-named person:

I HEREBY ORDER that the above-named person be remanded for admission as a patient to the said psychiatric facility for a period of not more than _____ ;

AND I FURTHER ORDER and direct you, the said Peace Officers, or any of you, to convey him/her to the said psychiatric facility;

AND I AUTHORIZE you, the authorities at the said psychiatric facility, to admit him/her in accordance with this order.

Judge or Magistrate

Date _____, 19____



Form 9
The Mental Health Act

ORDER FOR RETURN
UNDER SECTION 21

TO

AND TO all or any Peace Officers, Police Officers or Constables in the Province of Ontario.

WHEREASis subject to detention as
(print full name of patient)

SEE NOTE

and is absent fromwithout authorization;
(name of psychiatric facility)

AND WHEREAS the absence of such person without authorization became known to me on
....., 19.....;

NOW THEREFORE I hereby direct and authorize you, or any of you, to return such person to the said psychiatric facility or to the psychiatric facility nearest to the place where such person is apprehended,

AND in course of returning such person, you are authorized to detain such person in an appropriate place.

THIS ORDER shall have force until 19.....

.....
(officer in charge)

.....
(print name of officer in charge)

.....
(Psychiatric Facility)

Date 19.....

NOTE: The status of the person may be one or more of the following:

1. The subject of an application for psychiatric assessment .
2. The subject of an order by the Minister for psychiatric assessment.
3. An involuntary patient.
4. A person remanded by a judge.
5. A person who is the subject of a warrant of the Lieutenant Governor.



Form 13
The Mental Health Act

ORDER TO ADMIT A PERSON
COMING TO ONTARIO
UNDER SECTION 25

TO

WHEREAS I have reasonable cause to believe that
(print full name of person)

may come or be brought into Ontario from

and that such person is suffering from mental disorder of a nature or quality that likely will
result in

.....
.....

I therefor order you to take the said
(full name of person)

to
(name of psychiatric facility)

.....
Minister of Health

Dated theday of, 19.....

FOR NOTES SEE REVERSE

NOTES: 1. The following criteria are set out in section 25 of The Mental Health Act:

(a) serious bodily harm to the person; or

(b) serious bodily harm to another person.

2. Section 25 of The Mental Health Act states in part that :

“ The order is authority to admit, detain, restrain, observe and examine the person in the psychiatric facility . ”

3. Subsection 3 of section 13 of The Mental Health Act states in part :

“ The officer in charge shall release a person who is the subject of an order under section 25 upon the completion of 120 hours of detention in the psychiatric facility unless the attending physician has released the person, has admitted the person as an informal patient or has admitted the person as an involuntary patient by completing and filing with the officer in charge a certificate of involuntary admission.”



Revised: December 1999
The Mental Health Act

Consent to the Disclosure, Transmittal or Examination of a Clinical Record

I, _____
(print full name of person)

of _____
(address)

hereby consent to the disclosure or transmittal to or the examination by

_____ (print name)

of the clinical record compiled in _____
(name of psychiatric facility)

in respect of _____
(name of patient)

see
note 5

(signature)

(witness)

Dated the _____ day of _____ 19 _____

4434.42 (2/99)
Rev. No. 7531 4979

(Form 14)

Notes

- 1. Consent to the disclosure, transmittal or examination of a clinical record may be given by the patient or (where the patient has not attained the age of majority or is not mentally competent) by the nearest relative of the patient.
See subsection 3 of section 26a of the Act.
- 2. Patient
Clause b of subsection 1 of section 26a of the Act states that "‘patient’ includes former patient, out-patient and former out-patient."
- 3. Mentally competent.
Clause fa of section 1 of the Act defines "mentally competent" as "having the ability to understand the subject - matter in respect of which consent is requested and able to appreciate the consequences of giving or withholding consent"
- 4. Nearest relative
Clause ga of section 1 of the Act is as follows:

- "‘nearest relative’ means,
- (i) the spouse who is of any age and mentally competent, or
 - (ii) if none or if the spouse is not available, any one of the children who has attained the age of majority and is mentally competent, or
 - (iii) if none or if none is available, either of the parents who is mentally competent or the guardian, or
 - (iv) if none or if neither is available, any one of the brothers or sisters who has attained the age of majority and is mentally competent, or
 - (v) if none or if none is available, any other of the next of kin who has attained the age of majority and is mentally competent."
5. Signature.
Where the consent is signed by the nearest relative, the relationship to the patient must be set out below the signature of the nearest relative



Form 15
The Mental Health Act

STATEMENT BY ATTENDING PHYSICIAN UNDER
SUBSECTION 6 OF SECTION 26a OF THE ACT

I
(print name of physician)

am of the opinion that the disclosure, transmittal or examination of the clinical record or the following part of the clinical record, namely

.....
.....

compiled in
(name of psychiatric facility)

in respect of
(print full name of patient)

is likely to result in

SEE NOTE
.....

.....
(signature of physician)

Dated the day of 19

FOR NOTES SEE REVERSE

(Form 15)

NOTE: The following criteria are set out in subsection 6 of section 26a of the Act:

- (a)harm to the treatment or recovery of the patient ; or
- (b) ...
 - (i) injury to the mental condition of a third person, or
 - (ii) bodily harm to a third person

Schedule I Psychiatric Facilities

Appendix C

Schedule 1 Psychiatric Facilities

The following facilities are designated as psychiatric facilities with authority to detain persons under The Mental Health Act.

Location	Name
Barrie	Royal Victoria Hospital of Barrie
Belleville	Belleville General Hospital
Brampton	Peel Memorial Hospital
Brantford	The Brantford General Hospital
Brockville	Brockville Psychiatric Hospital (except St. Lawrence Regional Centre)
Burlington	Joseph Brant Memorial Hospital
Cambridge	South Waterloo Memorial Hospital
Chatham	Public General Hospital
Cornwall	Cornwall General Hospital
Don Mills	North York General Hospital
Downsview	York-Finch General Hospital
Goderich	Alexander Marine and General Hospital
Guelph	Homewood Sanitarium Limited
Hamilton	Hamilton General Hospital
Hamilton	Hamilton Psychiatric Hospital
Hamilton	McMaster University Medical Centre
Hamilton	Henderson General Hospital
Hamilton	St. Joseph's Hospital
Kingston	Hotel Dieu Hospital
Kingston	Beechgrove Regional Children's Centre
Kingston	Kingston General Hospital
Kingston	Kingston Psychiatric Hospital (except L. S. Penrose Centre)
Kitchener	Kitchener-Waterloo General Hospital
London	London Psychiatric Hospital
London	St. Joseph's Hospital
London	University Hospital, London
London	Victoria Hospital
Mississauga	Mississauga Hospital
Newmarket	York County Hospital
Niagara Falls	The Greater Niagara General Hospital
North Bay	North Bay Psychiatric Hospital (except Nipissing Regional Centre)
Oshawa	Oshawa General Hospital
Ottawa	Children's Hospital of Eastern Ontario
Ottawa	Hôpital Montfort
Ottawa	Queensway-Carleton Hospital

Location	Name
Ottawa	Royal Ottawa Hospital
Ottawa	Royal Ottawa Hospital-Regional Children's Centre
Ottawa	Ottawa Civic Hospital
Ottawa	Ottawa General Hospital
Owen Sound	The Owen Sound General and Marine Hospital
Penetanguishene	Mental Health Centre, Penetanguishene
Peterborough	The Peterborough Civic Hospital
Rexdale	Thistletown Regional Centre for Children and Adolescents
St. Catharines	The St. Catharines General Hospital
St. Thomas	St. Thomas Psychiatric Hospital (except St. Thomas Adult Rehabilitation & Training Centre)
Sarnia	Sarnia General Hospital
Sault Ste. Marie	The General Hospital
Scarborough	Scarborough Centenary Hospital
Scarborough	Scarborough General Hospital
Stratford	Stratford General Hospital
Sudbury	Sudbury Algoma Sanatorium Association-Community Psychiatric Hospital
Sudbury	Sudbury Algoma Sanatorium Association-Regional Children's Centre
Sudbury	Sudbury General Hospital of the Immaculate Heart of Mary
Thunder Bay	Lakehead Psychiatric Hospital (except Northwestern Regional Centre)
Thunder Bay	McKellar General Hospital
Timmins	St. Mary's Hospital
Toronto	Clarke Institute of Psychiatry
Toronto	Etobicoke General Hospital
Toronto	Mount Sinai Hospital
Toronto	Northwestern General Hospital
Toronto	Queen Street Mental Health Centre
Toronto	Queensway General Hospital
Toronto	St. Joseph's Hospital
Toronto	St. Michael's Hospital
Toronto	Sunnybrook Hospital
Toronto	Toronto East General and Orthopaedic Hospital
Toronto	Toronto General Hospital

Location	Name
Toronto	Toronto Western Hospital
Toronto	The Wellesley Hospital
Toronto	Women's College Hospital
Welland	Welland County General Hospital
Weston	Humber Memorial Hospital
Whitby	Whitby Psychiatric Hospital (except Durham Centre for the Developmentally Handicapped)
Willowdale	North York Branson Hospital
Windsor	Hotel Dieu of St. Joseph's
Windsor	Metropolitan General Hospital
Windsor	Windsor Western Hospital Centre Inc.
Woodstock	Woodstock General Hospital

